THE CENTRAL FREE DISPENSARY

RUSH MEDICAL COLLEGE

1935

STATISTICS 1926 - 1935 INCLUSIVE

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Central Free Dispensary of West Chicago

Organized May 4, 1867

Incorporated April 11, 1873

OFFICERS AND BOARD OF DIRECTORS

(January, 1935)

Officers

Robert H. Herbst, M.D	President
Oliver S. Ormsby, M.DFirs	st Vice-President
Mrs. Gertrude Howe BrittonSecon	d Vice-President
James H. Harper	Secretary
Henry W. Austin	Treasurer

Directors

Term Expires January, 1937

Henry W. Austin Edwin M. Miller, M.D.
Asa Bacon James H. Harper
Gertrude Howe Britton Robert H. Herbst, M.D.

Term Expires January, 1938

Arthur Dean Bevan, M.D.
Edward D. Allen, M.D.
Charles B. Goodspeed
James B. Herrick, M.D.

Donald P. Abbott, M.D.
George O. Fairweather
Vernon C. David, M.D.

Term Expires January, 1939

Ernest E. Irons, M.D.

Alfred T. Carton

J. Paul Welling

Wilber E. Post, M.D.

Philip R. Clarke

Harry E. Smoot

Oliver S. Ormsby, M.D.

Executive Committee

Robert H. Herbst, M.D., Chairman Ernest E. Irons, M.D. Oliver S. Ormsby, M.D.

Finance Committee

Charles B. Goodspeed, Chairman George O. Fairweather J. Paul Welling

Superintendent

George W. Duvall, M.D.

Director of Social Service
Dorothy Cornwell

Supervisor of Nurses

Ada Quinnell ecretary and Statisticia

Secretary and Statistician Hattie Brack

HOURS OF ADMISSION TO CLINICS

Morning

	Receiving Hours
General Medicine (new patients)	7:45
Kidney Diseases (Wed. and Sat.)	7:45
Arthritis (Tues. and Fri.)	7:45
Allergy (Mon. and Thurs.)	7:45
Stomach and Intestinal Diseases (daily)	7:45
Basal Metabolism (daily)	By Appointment
Nervous Diseases (daily)	By Appointment
Oral Surgery (Dental) (daily)	8:00 to 9:00
Diabetes (Thurs.)	By Appointment
Heart Diseases (daily)	8:30 to 9:30
Nutrition (Sat., ages 6 to 14)	8:30 to 9:30
Children's Diseases (daily, under 12 years)	
Physio-Therapy (daily, referred cases)	
Eye (New Cases) (daily, except Sat.)	
Pre-Natal (Mon., Tues., Fri. and Sat.)	
Surgery (daily)	
Diseases of Women, including gonorrhea (daily)	
Behavior Clinic (daily, except Fri.)	
Afternoon	1.00 / 2.00
Infant Feeding (Mon., Wed. and Thurs.)	
Throat, Nose and Ear (daily)	
Orthopedics (daily)	
Eye, Old Cases (daily)	
Skin (daily)	
Syphilis (daily)	
Syphilis (Children, Tues. and Sat.)	
Defects of Speech (Mon. and Thurs.)	
Genito-Urinary Diseases (daily)	
Psychiatric	By Appointment
Evening	
Industrial Clinics for Working People, Fr	idav
General Medicine	
Heart Diseases	6:30 to 8:00
Surgery	
Diseases of Women (including gonorrhea)	
Throat, Nose and Ear	
Syphilis	
Skin Diseases	
Genito-Urinary Diseases	
Industrial Clinics—6:30-8:00 P. M. Frida	
General Medicine Earle Gray,	W. M. McGrath
Throat, Nose and Ear	
Gynecology	
dynecology	orothy Edwards

MEDICAL STAFF

W ITHOUT the volunteer service of the medical staff of Rush Medical College the Dispensary could not maintain itself, as the cost would be prohibitive. The large daily attendance signifies the sacrifice made by the physicians in charge of the clinics, and also indicates the satisfaction of patients with the medical skill provided by The Central Free Dispensary and Rush Medical College.

STAFF

General Medicine James B. Herrick, M.D., Emeritus

Ernest E. Irons, M.D.

M. R. Bascomb, M.D.

S. Berger, M.D.

H. V. Bonebrake, M.D.

H. Brehaus, M.D.

S. Brownstein, M.D.

S. Dina, M.D.

J. Everly, M.D.

J. Fishman, M.D.

F. O. Frederickson, M.D.

F. A. Fulbrigge, M.D.

W. E. Gouwens, M.D.

Earle Gray, M.D.

R. J. Hennemeyer, M.D.

H. L. Hilkovitch, M.D.

S. Jansen, M.D.

W. J. Kirby, M.D.

R. S. Lang, M.D.

M. R. Lichtenstein, M.D.

A. Loverdi, M.D.

L. L. McLellan, M.D.

E. W. Pernokis, M.D.

S. K. Robinson, M.D.

H. C. Roll, M.D.

W. G. Rurik, M.D.

A. F. Schick, M.D. C. A. Sima, M.D.

M. Sima, M.D.

M. Simkin, M.D.

W. Simkin, M.D.

E. E. Stearns, M.D.

S. Taylor, M.D.

W. Thomas, M.D.

W. O. Thompson, M.D.

A. N. Trapp, M.D.

George Turner, M.D.

E. G. Vrtiak, M.D.

Thos. G. Walsh, M.D.

Cardiac

S. R. Slaymaker, M.D.

S. P. Anthony, M.D.

M. P. Gethner, M.D.

G. G. Hallenbeck, M.D.

R. B. Hemphill, M.D.

J. A. Hubata, M.D.

Edward Jordon, M.D.

T. E. Kallal, M.D.

C. J. Lundy, M.D.

J. P. Plaut, M.D.

A. J. Reidel, M.D.

H. A. Richter, M.D.

A. S. Shoset, M.D. H. I. Sippy, M.D.

R. B. Stoops, M.D.

J. Tetrev, M.D.

I. Trieger, M.D.

L. W. Woodruff, M.D.

Metabolism

Rollin T. Woodyatt, M.D.

B. Bird, M.D.

L. K. Campbell, M.D.

Earle Gray, M.D.

A. Stenn, M.D.

Pediatrics

Clifford G. Grulee, M.D.

H. N. Sanford, M.D. W. J. Buhrman, M.D. G. W. Elrich, M.D.

M. J. Filipiak, M.D.

STAFF—Continued

C. J. Harrison, M.D.

J. T. Hauch, M.D.

G. V. Herman, M.D.

E. I. Leslie, M.D.

M. Lewiston, M.D.

H. S. Noyes, M.D.

F. M. Rees, M.D.

W. J. Siemsen, M.D.

C. K. Stulik, M.D.

E. S. Watson, M.D.

B. I. Beverly, M.D.

Nutrition

F. W. Allin, M.D.

K. M. Anderson, M.D.

Infant Welfare

J. K. Amtman, M.D.

C. P. Brown, M.D.

J. T. Hauch, M.D.

Behavior

R. C. Hamill, M.D.

Neurology

Thor Rothstein, M.D., Emeritus

P. Bassoe, M.D.

L. W. Avery, M.D.

J. M. Cameron, M.D.

J. Favill, M.D.

H. G. Hardt, M.D.

H. Hoffman, M.D.

J. M. Radzinski, M.D.

R. Richter, M.D.

D. B. Rotman, M.D.

Y. Scheftel, M.D.

M. G. Schroeder, M.D.

W. M. Stephens, M.D.

A. Verbrugghen, M.D.

T. Wheeler, M.D.

Psychiatry

S. G. Geiger, M.D.

J. A. Larson, M.D.

James Robbins, M.D.

D. B. Rotman, M.D.

T. Wheeler, M.D.

Speech

E. L. Kenyon, M.D.

Surgery

Vernon C. David, M.D.

J. P. Allegretti, M.D.

H. L. Baker, M.D.

A. E. Diggs, M.D.

John Dorsey, M.D.

A. Fehr, M.D.

J. J. Ireland, M.D.

G. H. Jackson, M.D.

S. E. Lawton, M.D.

E. Nittis, M.D.

W. F. Pierce, M.D.

L. F. Ploche, M.D.

W. J. Potts, M.D.

R. L. Rider, M.D.

Robert Sharer, M.D.

F. V. Theis, M.D.

S. A. Zieman, M.D.

Urology

H. L. Kretschmer, M.D.

Robert H. Herbst, M.D.

K. E. Barber, M.D.

G. O. Baumrucker, M.D.

Edward Buckman, M.D.

Thomas Cottrell, M.D.

H. S. Heckel, M.D.

E. J. Kocour, M.D.

M. McBirdie, M.D.

C. D. Parker, M.D.

H. J. Polkey, M.D.

A. Romberger, M.D.

A. J. Sullivan, M.D.

C. G. Weller, M.D.

Gynecology and Obstetrics

Noble S. Heaney, M.D.

M. H. Boley, M.D.

H. Boyson, M.D.

B. W. Breister, M.D.

G. Cotts, M.D.

W. J. Nixon Davis, Jr., M.D.

C. C. Draa, M.D.

J. R. Durburg, M.D.

M. Field, M.D.

R. H. Fouser, M.D.

A. J. Gabrielianz, M.D.

H. J. Holloway, M.D.

Arthur Dean Bevan, M.D., Emeritus A. H. Klawans, M.D.

STAFF—Continued

E. Nittis, Jr., M.D.

F. O. Priest, M.D.

E. Schweid, M.D.

L. Stulik, M.D.

J. E. Tremaine, M.D.

Paul Woodall, M.D.

Laryngology and Otology George W. Shambaugh, M.D.,

Emeritus

D. B. Hayden, M.D.

Nora Brandenburg, M.D.

Edward Chainski, M.D.

L. T. Curry, M.D.

C. L. Daugherty, M.D.

E. W. Hagens, M.D.

T. W. Lewis, M.D.

George E. Shambaugh, Jr., M.D.

L. A. Tancil, M.D.

G. A. Torrison, M.D.

L. F. Wallner, M.D.

R. W. Watkins, M.D.

F. Wojniak, M.D.

Ophthalmology W. F. Moncrieff, M.D.

F. B. Cooper, M.D.

C. V. Crane, M.D.

R. Carmody, M.D.

J. W. Holmes, M.D.

M. M. Jacobson, M.D.

Bertha Klein, M.D.

Elias Selinger, M.D.

Physio-Therapy

E. Frankel, M.D.

D. W. Kobak, M.D.

Dermatology

Oliver S. Ormsby, M.D.

E. A. Oliver, M.D.

J. H. Mitchell, M.D.

E. A. Skolnik, M.D.

J. R. Webster, M.D.

R. Richter, M.D.

R. H. Scull, M.D.

C. W. Finnerud, M.D.

D. V. Omens, M.D.

L. W. Avery, M.D.

R. Nomland, M.D.

W. W. Tobin, M.D.

N. G. Shaw, M.D.

I. Aleshire, M.D.

J. Kanter, M.D.

F. Kendrick, M.D.

Industrial Clinics—6:30-8:00 P. M. Friday

Throat, Nose and Ear-L. T. Curry, M.D.

General Medicine—Earle Gray, M.D., W. M. McGrath, M.D.

Urology—George Baumrucker, M.D.

Gynecology—Dorothy Edwards, M.D.

Dermatology—W. W. Tobin, M.D.

Surgery—R. K. Gilchrist, M.D., J. H. Chivers, M.D.

OUR CONTRIBUTORS

THE Central Free Dispensary wishes to express its full appreciation for the continued financial support from its friends. The Dispensary could not carry on its program without their assistance. For many years donations have been the means of tiding the finances over difficulties. In addition to contributions, since 1931 the Central Free Dispensary has received financial support from public funds to assist in the cost of medical care for clients of the Illinois Emergency Relief Commission.

Excerpt from report of Superintendant—Annual Meeting Board of Directors, January 1936.

PRIOR to 1931 small fees contributed by patients were the principal source of income to meet expense for their medical care at the Central Free Dispensary. Since the beginning of 1931 conditions have changed, with a steady decrease in income from that source, necessitating supplementary income to maintain the high standard that has always characterized the institution in rendering medical aid to the sick poor of Chicago.

The Central Free Dispensary began to experience the effects of unemployment in 1931, when total visits and free visits rose rapidly as compared with the preceding five years. Total visits in 1926 numbered 107,158, including 14,723, or 13.7 per cent of the number, classified as free. A gradual increase was shown for the ensuing years, when in 1930 total visits numbered 152,427, with 62,235 or 41.5 per cent who could not pay the admission fee of fifty cents for adults, thirty-five cents for children and fifteen cents for infants, and were admitted free for medical attention.

Corresponding to the increase in free visits and free special services, income from patients decreased from 84.5 in 1926 to 32.9 per cent in 1935, in proportion to income from all sources. Income from patients in 1926 amounted to \$79,573.21, which decreased to \$37,178.11 in 1935. Incidentally, over the decade beginning with 1926 and ending with 1935 income from all sources amounted to \$1,050,460, while expense amounted to \$1,045,655, or an increase in working capital during the ten years of \$4,805.00. Total visits numbered 1,524,606 (including 246,411 new patients) with 786,820, or 51.6 per cent admitted free.

The object of the Central Free Dispensary as expressed by the founders is: "To furnish the sick poor with medical attention . . . and to accomplish this work in the most faithful manner and at the least possible expense." Since the inception of the institution nearly seventy years ago this basic principle has been kept in mind, recognizing and accepting the advancement of medical science, and the importance of medical social work in the restoration and rehabilitation of dispensary patients.

The Central Free Dispensary has access to the twenty-six medical departments of Rush Medical College, with a faculty representing all specialties of modern medicine, which assures skilled medical service to the sick poor of the city. The Social Service Department comprises ten case workers and a director, with clerical assistance to complete a balanced organization of medical social work, to assist the medical staff in determining the social problems that arise in the treatment of those who depend on charity for medical aid. The work of the social service department is accomplished by contact with patients in the dispensary, and home visits on intensive cases; but largely through family welfare organizations which use the Central Free Dispensary for clients who are in need of medical care.

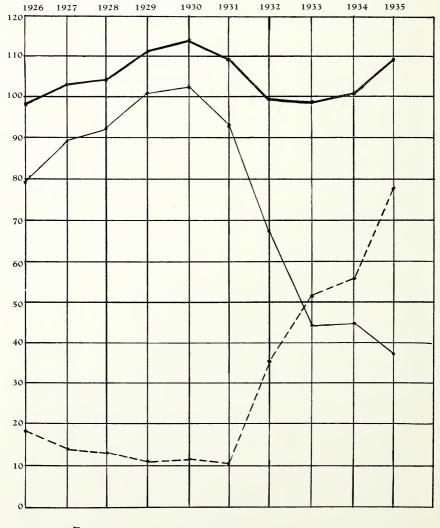
Since the beginning of unemployment in 1930 it has been the aim of the Central Free Dispensary to limit service to the strict need of patients. It was recognized that a vast sum of money would be required to supply other than the restricted requirements essential to the diagnosis and treatment of the sick. The medical attendants and the dispensary personnel have worked together to keep the cost of operation to the point consistent with efficient service, and as a result, as visits by patients increased, expense per visit decreased.

During the last five years the drug department filled 364,-421 prescriptions for medicine and of that number 272,116, or 74.7 per cent were filled without charge to the patients. Tonsil operations numbered 8,366 during this time. In proportion, the Central Free Dispensary has given thousands of x-rays, laboratory tests, bottles of insulin, and other special services essential to the welfare of patients. This was

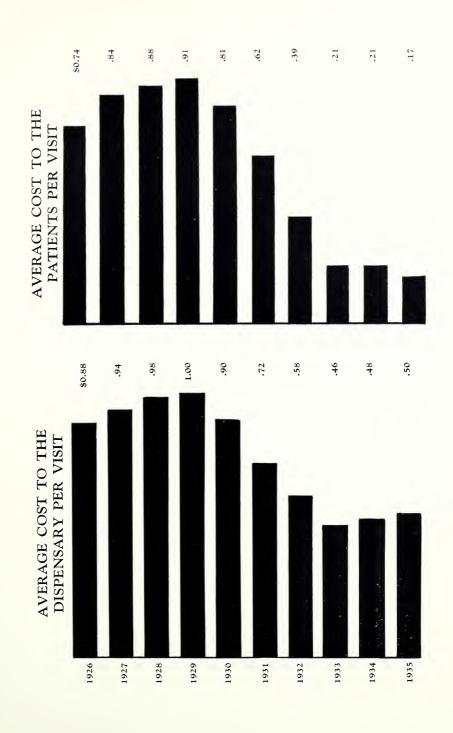
the custom prior to 1931.

During 1935 expense for insulin amounted to \$4,765.00, with a dispensing deficit of 80.9 per cent, or \$3,856.40, which represents the amount of free insulin given patients with diabetes who are supervised and managed in the diabetic department. 905 confinements were conducted safely in homes of the poor at an average cost to the family of \$1.03 each, including prenatal and postnatal care. Multiple deliveries occurred in eleven cases, in which twins were born. Total confinement cases attended during the last five years numbered 5,910. The obstetrical service at the Central Free Dispensary is in collaboration with Rush Medical College and Presbyterian Hospital.

Graph showing expenditures, receipts from patients and receipts from other sources during the last ten years.



Expenses
Receipts from Patients
Receipts from other Sources



ORKING men and women and families whose incomes are small and family budgets large, not wholly dependent but not financially able to pay for private medical care are admitted to the clinics. Thousands of people who have no means and are dependent on charity are supplied expert medical diagnoses in the clinics. X-rays, medicines, insulin, blood tests, laboratory analyses, hospital needs and other special requirements of the patients are supplied free when patients are unable to pay for the service.

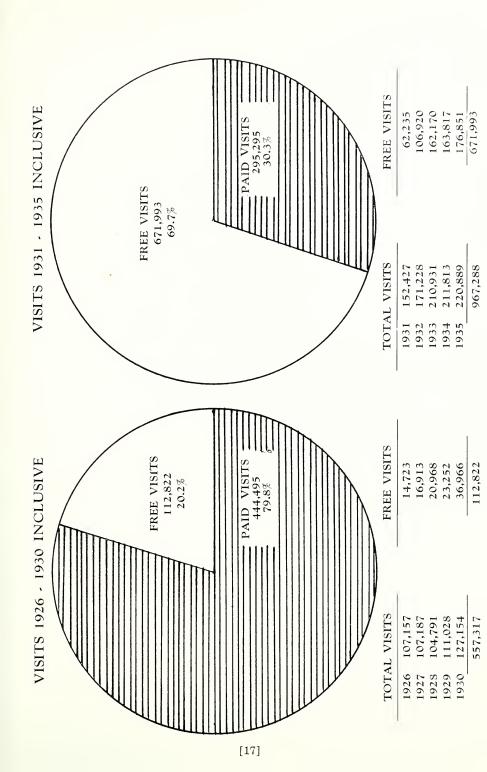
Excerpt from report of Director of Social Service - Annual Meeting Board of Directors, January 1936.

THE work of the Social Service Department of the Central Free Dispensary falls into two divisions—the administrative work, which includes the management of the clinics and the establishment of the patient's inability to pay a private physician or dispensary fees, and the purely medical social service functions.

The clinic management is not strictly a function of the Social Service Department, but we believe that the medical social worker in the clinic, because of her knowledge of community resources and the significance of the diagnosis, assists the doctor in his work and aids him in rendering service to a large group of patients. It must be remembered that the doctor sees the clinic patient, not against the patient's background and with a knowledge of his environment, but as an isolated individual. The medical social worker's real place in the team, which is headed by the doctor and includes nurse, social worker and patient, is to see that the doctor is furnished with all the social information which would bear upon his patient's physical condition; to attempt to make adjustments in the situation which are necessary to carry out the doctor's orders and promote his treatment and to interpret the patient's physical condition and his treatment to the patient or any interested outside agency.

Because a large number of our patients at the present time are clients of the relief agencies, a major part of the work is to act as interpreter between the physician and relief organization. Although this type of service may be accomplished rather quickly, it is nevertheless important. That an ulcer patient may secure a diet, in order that he may stay out of the hospital; a hernia patient may be furnished a truss, so that he may be eligible for work; or the cardiac patient removed from work, may not be especially spectacular, but it is essential in carrying out the doctor's program and rehabilitating the patient. A careful explanation of the medical situation is needed if the family worker is to plan intelligently for the family, and this can best be done by the medical social worker, who has some knowledge of the medical angle and some of the social implications.

The medical social worker's knowledge of community resources enables her to place at the disposal of her patient and, through the patient, at the disposal of the doctor, advantages and opportunities which the more fortunate private patient has within his own reach. The "clinic" patient is a "clinic" patient because for various reasons he cannot provide through his own resources those things which he should have to maintain necessary standards. The medical social worker's place in the main is an advisory one. She supplements the doctor's information, the resources of the patient and the understanding of the community.



BY-LAWS OF THE CENTRAL FREE DISPENSARY

As Amended January 6, 1917

ARTICLE I.

NAME, OBJECT, PLACE OF BUSINESS, AND SEAL

Section 1. Name. The name of the corporation shall be the CENTRAL FREE DISPENSARY OF WEST CHICAGO.

Section 2. Object. The object for which said corporation is formed is in general as follows: to aid persons who are sick and unable to pay for medical attendance, and to do this work efficiently and with no pecuniary profit.

Section 3. *Place, etc.* The business of said corporation shall be located in Chicago in the state of Illinois.

Section 4. Seal. The corporate seal of this corporation shall contain the full corporate name of this corporation. Within the circle shall be the words, "Corporate Seal 1873."

ARTICLE II.

Section 1. *Membership*. Any person upon the payment of \$10.00, and whose name shall be approved by the Executive Committee, shall become an "Annual Member."

Any person upon the payment of \$25.00, or more, and whose name shall be approved by the Executive Committee, shall become a "Contributing Member," for the period of one year.

Any person upon the payment of \$500.00, and whose name shall be approved by the Executive Committee, shall become a "Life Member."

All members shall be entitled to vote at any annual or special meetings of the corporation. Voting may be either in person or by proxy, and each member shall be entitled to one vote.

All persons directors of this corporation at the time of the adoption of these by-laws shall, by reason of past services, become members for life.

Section 2. Membership Committee. The President at the first meeting of the Board of Directors shall appoint, subject to the approval of the Board of Directors, a committee of three, to be known as the "Membership Committee," who shall hold office for one year, and until their successors are appointed, and whose duties shall be to solicit and recommend to the Executive Committee persons for membership.

ARTICLE III

MANAGEMENT AND CONTROL

Section 1. Directors. The affairs of the corporation shall be managed and controlled by a Board of 21 members to be known and styled as the Board of Directors, who shall be elected by the members of the corporation on the first Tuesday of April, 1914. Seven of the above members of the Board of Directors are to be elected to hold office for the period of one year and until their successors are elected; seven to be elected to hold office for the period of two years and until their successors are elected; and seven to be elected to hold office for the period of three years and until their successors are elected.

Section 2. Annual Meeting. After the year 1914, there shall be held on the third Tuesday in January of each year, annual meetings of the corpora-

tion for the purpose of electing directors whose terms shall have expired under the provision of the above section, and to transact such other business as may legally come before such meeting.

Section 3. Special Meetings. Special meetings of the members of the corporation may be called by the Secretary upon request of a majority of the Board of Directors, or upon the written request to the secretary by lifteen members of the corporation, and the call for such meeting shall state the time, place and business to be transacted, and no business other than that contained in the call shall be transacted.

Section 4. *Qualification*. Any person of good moral character, a resident of the State of Illinois, and who is a member of the corporation, may be elected a director. The vote shall be by ballot, and a majority of those voting shall be necessary for an election. At least one of the directors shall be a member of the faculty of Rush Medical College.

Section 5. Vacancies. Vacancies on the Board of Directors may be filled by the majority of the remaining members of the Board at any directors' meeting regularly called and held.

Section 6. Officers. The directors shall elect all the officers of the corporation.

Section 7. Compensation. No director shall receive a salary or compensation for services as director.

Section 8. Quorum. Twelve members of the corporation shall constitute a quorum for the transaction of business at any regular or special meeting thereof.

ARTICLE IV.

MEETINGS OF DIRECTORS, QUORUM, ETC.

Section 1. Directors' Meetings. The Board of Directors shall meet quarterly on the third Tuesday of January, April, July and October, and the first meeting of said Board shall convene immediately upon the adjournment of the regular annual meeting of the members.

Section 2. Special Meetings. Special meetings of the Board of Directors may be called at any time by the President, and in his absence by the Secretary, on application in writing by a majority of the members of the Board, by mailing to each director, at least three days prior to the date of such meeting, a written or printed notice, stating the object, time and place of such meeting.

Section 3. Quorum. A quorum shall consist of seven members of the Board of Directors, but directors less than a quorum may adjourn the meeting to a future date.

ARTICLE V.

Section 1. Officers. The officers of the corporation shall be a President, a Vice-President, a Second Vice-President, a Secretary and a Treasurer, to be elected by the Board of Directors at its first meeting, and which officers shall hold their respective offices for a period of one year, and until their successors are elected and qualify.

Section 2. President. The President shall preside at all meetings of the Board of Directors, and at meetings of the Executive Committee; countersign orders drawn by the Secretary on the Treasurer, call any special meetings of the Directors or Executive Committees when he may deem it necessary, or whenever he is requested to do so by three Directors.

Section 3. Vice-President. In the absence of the President, the First

Vice-President, and in his absence, the Second Vice-President shall perform the duties of the President. In case of the death, resignation or removal from the State of the President, the First Vice-President shall be ex-officio President, until the end of the term to which the President shall have been elected.

Section 4. Secretary. The Secretary shall keep a correct record of the proceedings of all meetings of the members, Directors, and Executive Committee; draw all orders for money on the Treasurer; have the custody of the corporate seal, which he shall attach to such documents as may require the seal; make and sign all certificates of election of directors, and see that they are recorded according to law; and keep a correct and revised list of all members of the corporation, and their addresses.

Section 5. Treasurer. The Treasurer shall have the custody of all moneys belonging to the corporation and shall only disburse the same upon orders, signed by the Secretary and properly countersigned by the President; and funds shall be invested only upon the approval of the Board of Directors. The Treasurer shall qualify by giving to the corporation a bond, with security to be approved by the Executive Committee, conditioned for the proper keeping, use, disbursement, investment and transfer to his successor of all moneys, bonds, and other property of the corporation, which may come into his hands as such Treasurer.

Section 6. Executive Committee. There shall be an Executive Committee consisting of three members. The President shall be Chairman of this Committee. The other two members shall be appointed by the President subject to the approval of the Board of Directors. The members of this committee shall hold office for one year or until their successors are appointed. The Executive Committee shall have charge of the general conduct of the Dispensary and shall make general rules governing the same.

Section 7. Fiscal Year. The fiscal year of the corporation shall begin on the first day of January of each year, and terminate on the last day of December of the same year.

Reports. All officers shall make full and complete reports of their acts and doings in reference to the business of the corporation at the annual meetings of the members of the corporation.

ARTICLE VI.

FINANCE COMMITTEE

Section 1. Finance Committee. The President at the first meeting of the Board of Directors shall appoint, subject to the approval of the Board of Directors, a committee of three to be known as the "Finance Committee," who shall hold office for one year and until their successors are appointed, and whose duties shall be to raise funds for the support and financing of this organization, and shall have power to devise plans for raising the money and providing means for carrying on the work of this corporation, and which committee shall make a report at each meeting of the Board of Directors, except the first, and at the annual meeting of the members of the corporation.

ARTICLE VII.

Section 1. The By-Laws of this corporation may be modified, altered or amended at any annual meeting of the Board of Directors, or at any adjourned session thereof, provided that the party or parties proposing the same shall mail a copy of said proposed amendment to each member of the Board of Directors, at his place of residence, at least one week prior to the meeting at which said proposed amendment is to be offered.

ARTICLE VIII.

Section 1. Auditing. The books of the Dispensary shall be annually audited by a Certified Public Accountant.

ARTICLE IX.

Section 1. Rules. Robert's "Rules of Order" shall be the rules used in the conduct of all meetings.



FORM OF BEQUEST

I give and bequeath to the Central Free Dispensary,
in the City of Chicago, and incorporated by the Legisla-
ture of the State of Illinois, the sum of
Dollars,
in trust, to be applied for the use and benefit of the Central
Free Dispensary, conducted under the auspices of the regu-
larly elected officers.



CENTRAL FREE DISPENSARY TO MARK 100th BIRTHDAY

REPRINT FROM THE CHICAGO DAILY NEWS SATURDAY, JANUARY 28, 1939

Central Free Dispensary, attached to Presbyterian Hospital, will to all intents and purposes approximate its 100th anniversary this year of service to Chicago's unfortunate. Officially, next Tuesday the 71st annual meeting will be held by its board of directors.

In that time, its leaders estimate, it has given medical treatment to more than 1,000,000 persons in something more than 5,000,000 visits. It is the largest institution of its sort west of Baltimore.

Last year, for instance, its superintendent, Dr. George W. Duvall, reports, 186,655 visits were made by 29,607 persons, including 3,050 children in the pediatric clinic and 875 infants in the baby clinic. Less than 20 per cent of them, as established by experienced sociological investigation, were able to pay the nominal fee of 50 cents.

